

European Stroke Organisation expedited recommendation for the use of short-term dual antiplatelet therapy early after minor stroke and high-risk TIA

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Jesse Dawson¹ , Áine Merwick² , Alastair Webb³ ,
Martin Dennis⁴, Julia Ferrari⁵ and Ana Catarina Fonseca⁶ ;
for the European Stroke Organisation

Abstract

Prevention of early recurrent ischaemic stroke remains a priority in people with TIA or ischaemic stroke. A number of trials have recently been completed assessing the efficacy of short-term dual antiplatelet therapy (DAPT) versus single antiplatelet therapy early after minor or moderate stroke or high-risk TIA. We present an Expedited Recommendation for use of dual antiplatelet therapy early after ischaemic stroke and TIA on behalf of the ESO Guideline Board. We make a strong recommendation based on high quality of evidence for use of 21-days of dual antiplatelet therapy with aspirin and clopidogrel in people with a non-cardioembolic minor ischaemic stroke or high-risk TIA in the past 24 hours. We make a weak recommendation based on moderate quality evidence for 30-days of dual antiplatelet therapy with aspirin and ticagrelor in people with non-cardioembolic mild to moderate ischaemic stroke or high-risk TIA in the past 24 hours.

Keywords

Stroke, TIA, antiplatelets

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¹College of Medical Veterinary and Life Sciences, University of Glasgow, Glasgow, UK

²Department of Neurology, Cork University Hospital, Cork, Ireland

³Wolfson Centre for Prevention of Stroke and Dementia, Department of Clinical Neurosciences, John Radcliffe Hospital, University of Oxford, Oxford, UK

⁴Centre for Clinical Brain Sciences, University of Edinburgh, Edinburgh, UK

⁵Department of Neurology, St. John's of God Hospital, Vienna Austria

⁶Department of Neurosciences (Neurology), Hospital de Santa Maria, University of Lisbon, Lisboa, Portugal

Corresponding author:

Jesse Dawson. College of Medical Veterinary and Life Sciences, University of Glasgow, University Avenue, Glasgow G12 8QQ, UK.
Email: Jesse.dawson@glasgow.ac.uk